

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

09/647304

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	12 minus 20 = *	96
INDEPENDENT CLAIMS	3 minus 3 = *	96
MULTIPLE DEPENDENT CLAIM PRESENT		96

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY
TYPE

OR

OTHER THAN
SMALL ENTITY

RATE	FEES
X\$ 9=	
X39=	
+130=	
TOTAL	

RATE	FEES
	840
216	
X\$18=	
264	
X78=	
968	
+260=	
OR TOTAL	840

OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
OR TOTAL ADDIT. FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	27	Minus	** 20 = 7
	Independent	*	8	Minus	*** 3 = 5
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	126.00
X78=	56
+260=	320
OR TOTAL ADDIT. FEE	432.00

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
OR TOTAL ADDIT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

09/64730

IAL NUMBER : _____

TO: PCT OFFICE OF FINANCE
CRYSTAL PLAZA 2 - 5TH FLOOR

FROM : PCT INTERNATIONAL DIVISION - DO/EO
CRYSTAL PLAZA 2 - 8TH FLOOR

PLEASE PROCESS THE FOLLOWING CORRECTIONS :

FROM

TO

CODE
958

FEE
690

CODE
970

FEE
840

OTHER :

CHARGE VOUCHER IS ATTACHED TO CHARGE / REFUND
ADDITIONAL FEES

OTHER : _____

BY A CHECK

BY A CHARGE TO DEPOSIT ACCOUNT NO. _____